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Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 03/12/2004 26646 7590 KENYON & KENYON Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. ONE BROADWAY NEW YORK, NY 10004 (Depositor's name (Signature) (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/979,568 01/17/2002 11839/12 3280 TITLE OF INVENTION: ROTARY SHIFT VALVE FOR SERVO-ASSISTED STEERING SYSTEMS OF MOTOR VEHICLES APPLN, TYPE **SMALL ENTITY** ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE 06/14/2004 NO \$1330 \$0 \$1330 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS RIVELL, JOHN A 3753 137-625230 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the Kenyon & Kenyon names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form attorneys or agents. If no name is listed, no name TO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ZF Lenksysteme GmbH Schwaebisch Gmuend, Federal Republic of Germany Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual XX corporation or other private group entity 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): XIssue Fee A check in the amount of the fee(s) is enclosed. Publication Fee □ Payment by credit card. 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